BEFORE COPYING FORM, ATTACH SITE IDENTIFICATION LABEL OR ENTER:

SITE NAME:

EPA RCRA ID No. IAD073489288

EPA IO NO:

AlliedSignal Laminate Systems 665 Lybrand Street Postville, IA



MAR 04 1996 S. ENVIRONMENTAL PROTECTION AGENCY

1995 Hazardous Waste Report

FORM

IDENTIFICATION AND CERTIFICATION

INSTRUCTIONS: Read the detailed instructions beginning on page 9 of the 1995 Haza	ardous Waste Report booklet before completin	g this form.	
Sec. I Site name and location address. Complete A through H. Check the box 🗆 information. Instruction page 10.	in items A, C, E, F, G, and H if same as label	; if different, enter corrections. If label is absent, enter	
A. EPA IO No. Same as labePET or →	B. County Allamake	e	
C. Site/company name Same as label ^{*C} D or →	D. Has the site name associated with this EPA ID changed since 1993? 1 Yes 2 2 No		
E. Street name and number. If not applicable, enter industrial park, building name, or ot Same as labe™o or →	her physical location description.	Married Anna Committee of All Committee	
F. City, town, village, etc. Same as laber© or →	G. State Same as label LILA	H. Zip Code Same as label _52 11 16 2 - 0 19 171 7	
Sec. II Mailing address of site, Instruction page 10.			
A. Is the mailing address the same as the location address? □ 1 Yes (SKIP TO □ 2 No (GO TO 8		The second secon	
B. Number and street name of mailing address P.O. Box 977	the are the second	Selected and A 1794 security will be a 1 ab	
C. City, town, village, etc. Postville	O. State	E. Zip Code 5 2 1 6 2 0 9 7 7	
Sec. III Name, title, and telephone number of the person who should be contacted	d if questions arise regarding this report. Inst	ruction page 10.	
A. Please print: Last Name First name M.I. Trent Jesse C	B. Title EH&S Manager	C. Telephone 3 11 19 18 16 1 4 - 7 13 1 2 1 11 Extension (4 1 2 1 2 7	
Sec. IV "I certify under penalty of law that this document and all attachments we qualified personnel properly gather and evaluate the information submitted responsible for gathering the information, the information submitted is, to significant penalties under Section 3008 of the Resource Conservation and knowing violations."	d. Based on my inquiry of the person or pers the best of my knowledge and belief, true, and Recovery Act for submitting false informat	sons who manage the system, or those persons directly accurate and complete. I am aware that there are	
A. Please print: Last Name First name M.I. Gilbert James W.	B. Title	al Manager	
C. Signature James W. Helbert	O. Date of signature	02 22 96 MD. DAY YR.	

BY ANCH SEE

Page 1 of 1

MAR 0 4 1996

Sec.V - G	enerator St	atus.	Instruction pages	s 10, 12.ე√.	Sing.	x	8	131	e de la composition della comp	Edit Cold Bloom
A. 1995 RCRA generator status B. Reason for			B. Reason for	not generating	-		711		AND THE CUSTOM OF THE STATE	
(CHECK ONE BOX BELOW) (CHECK ALL				(CHECK ALL T	HAT APPLY)					/ 30° 85
□ 2 SOG					g-man-a					
Sec.Vi - (n-Site Was	te M	anagement Status	. Instruction p	pages 13, 14.					
A. Storage	subject to l	RCRA	permitting requirer	nents	B. Treatment, disposal, requirements	or recyclin	g subject to l	RCRA pern	nitting	C. RCRA-exempt treatment, disposal, or recycling
		1		u ale	mediah.	1	28	_		L3_i *** *** * .
Sec.VII -	Waste Minis	nizat	ion Activity durin	g 1994 or 199	5. Instruction pages 1	4, 15.				
	s site begin o 34 or 1995?	r exp	and a <u>source reduc</u>	tion activity	B. Did this site begin of 1995?	r expand a	recycling act	ivity during	g 1994 or	C. Did this site systematically investigate opportunities for source reduction or recycling during 1994 or 1995?
□ 1 Yes CX 2 No	n n				□ 1 Yes CX2 No					Z cX1 Yes
	of the factors of the factors			limit this site's	ability to initiate new o	or additiona	l <u>source redu</u> e	ction activ	ities in 1994	4 or 1995?
Yes OX 1	<u>No</u> □ 2 O C2	a. b.		ent capital to install new source reduction equipment or implement new source reduction practices technical information on source reduction techniques applicable to the specific production processes						
□ 1 2 ×1	OK2	c. d.	Source reductio	ion is not economically feasible: cost savings in waste management or production will not recover the capital investment product quality may decline as a result of source reduction						not recover the capital investment
DC1	OK2	e. f.	Permitting burd	ens	duction processes					77 P XOC 119
0 1 0 1	9K2	g. h.	Source reduction	n previously imp	plemented - additional re plemented - additional re	duction doe	es not appear	to be eco	nomically fe	easible easible
0 1 0 1	CK2	i. j.	Other (SPECIFY	n previously imp COMMENTS IN	plemented - additional re I BOX BELOW)	duction doe	es not appear	to be fea:	sible due to	permitting requirements
E. Oid any (CHECK Y	of the facto	ors lis	ted below delay or CH ITEM)	limit the site's	ability to initiate new o	r additional	on-site or of	l-site <u>recyc</u>	iling activiti	es during 1994 or 1995?
Yes	No ax2					Yes	No ·			
- 1			implement new red	ycling practice	recycling equipment or	<u> </u>	X5 2	g.	site for re	
01	3 2	b.	Lack of technical i		recycling techniques	201	□ 2 3€□ 2	h. i.		limitations of production processes inhibit on-site recycling
- 1	. ₫ 2	C.	Recycling is not en in waste managem investment	conomically fea:	sible: cost savings	01	X6 2 X6 2 X6 2	j. k. l.	Lack of po Unable to	burdens inhibit recycling ermitted off-site recycling facilities identify a market for recycled materials previously implemented - additional recycling does not
5 C 1	□ 2	d.		uct quality may	decline as a result of	01	3E 2	m.	appear to	be technically feasible previously implemented - additional recycling does not
- 1	CC 2	8.			inhibit shipments of	01	3 4⊒ 2	η,	appear to	be economically feasible previously implemented · additional recycling does not
- 1	CC 2	f.		•	shipments off-site for	01	35 2		appear to Other (SPI	be feasible due to permitting requirements ECIFY COMMENTS IN BOX BELOW)
				-						Carlot Annual Control

Comments:

RCRA Records Center

BEFORE COPYING FORM, ATTACH SITE IDENTIFICATION LABEL OR ENTER:

SITE NAME:

EPA RCRA ID No. IAD073489288

EPA ID NO: AlliedSignal Laminate Systems

665 Lybrand Street

Postville, IA

INSTRUCTIONS: Read the detailed instructions beginning on page 16 of the 1995 Hazardous Waste Re



U.S. ENVIRONMENTAL PROTECTION AGENCY

1995 Hazardous Waste Report

FORM GM

INSTRUCTIONS: Read the detailed instructions beginning on page 16 of the 1995 Hazardou	s Waste Report booklet before completing this form.					
A. Waste description Instruction page 18. Still bottoms tillation unit containing smal various solvents.	from solvent recovery batch dis- 1 smounts of acetone, toluene,& other					
B. EPA hazardous waste code Page 19.	C. State hazardous waste code Page 19.					
F 0 0 3 F Q 0 5						
<u> </u>						
D. SIC code Page 19. E. Drigin code L51 Page 19 F. Source code Page 20. System Type LM. Q 2 1 LA. 7 3	G. Point of measurement H. Form code I. RCRA - radioactive mixed Page 20. Page 20. LB 6 10 1 2 1					
Sec. II A. Quantity generated in 1994 B. Quantity generated in 1995 Page 21.	C. UOM Oensity D. Oid this site do any of the following to this waste: treat on site, dispose on site, recycle on site, or discharge to a sewer/PDTW? Page 21.					
4 9 5 Q Q	1 Yes (CONTINUE TO SYSTEM 1)					
ON-SITE PROCESS SYSTEM 1	DN-SITE PROCESS SYSTEM 2					
On-site process system type Quantity treated, disposed, or recycled on site page 22. in 1995	On-site process system type Quantity treated, disposed, or recycled on site Page 22. in 1995					
LMI LIIIIIIIIII	LM					
Sec.III A. Was any of this waste shipped off-site in 1995 Po 1 Yes (CONTINUE Instruction page 22.						
Site 1 B. EPA ID No. of facility waste was shipped to Page 23. O H, D 093 945 2 9 3	C. System type shipped to D. Off-site E. Total quantity shipped in 1995 Page 23. Page 23. 1					
B. EPA ID No. of facility waste was shipped to Page 23.	C. System type shipped to D. Off-site E. Total quantity shipped in 1995 Page 23. Page 23. Page 23.					
LN_A	[M: 1]					
The second of th	Sec. IV A. Did new activities in 1995 result in minimization of this waste? □ 1 Yes (CONTINUE TO BOX B) Instruction page 24. □ 1 Yes (CONTINUE TO BOX B)					
W W	(THIS FORM IS COMPLETE)					
B. Activity Page 24. C. Other effects Page 25. C. Other effects Page 25. D. Quantity recycled in 1995 Page 25.	(THIS FORM IS COMPLETE)					
Instruction page 24. Instruction page 25. Instruction page 26. Instructi	(THIS FORM IS COMPLETE) due to new activities E. Activity/production F. 1995 source reduction quantity Page 26.					

BEFORE COPYING FORM, ATTACH SITE IDENTIFICATION LABEL OR ENTER:

SITE NAME:

EPA RCRA ID No. IAD073489288

EPA ID NO: AlliedSignal Laminate Systems

665 Lybrand Street

Postville, IA



U.S. ENVIRONMENTAL PROTECTION AGENCY

1995 Hazardous Waste Report

FORM GM

INSTRUCTIONS: -Read the det	ailed instructions beginning on page 16 of the 1995 Hazardou	s Waste Report booklet before complete	ing this form.		
Sec. I A. Waste descrip	ntion Instruction page 18. cable solvent used for pa	rts washer, con	tains petroleum naptha		
B. EPA hazardous waste code	Page 19.	C. State hazardous waste code Page	19.		
<u>D</u> (D ₁ 3 ₁ 9 ₁ D ₁ 0 ₁ 8				
	A				
	E. Origin code (1) Page 19 F. Source code Page 20. System Type LM L L L P PAGE 19 F. Source code Page 20.	G. Point of measurement H. Form of Page 20. Page 20. LB_2_1			
Instruction Page		C. UOM Density Page 21.	D. Did this site do any of the following to this waste: treat on site, dispose on site, recycle on site, or discharge to a sewer/POTW? Page 21. 1 Yes (CONTINUE TO SYSTEM 1)		
4,0	0, 8, 7, 3, 6, 8, 5,	□ 1 lbs/gal □ 2 sg	2 No (SKIP TO SEC. III)		
ON-SITE PROCESS SYSTEM 1		ON-SITE PROCESS SYSTEM 2			
On-site process system type Page 22.	Quantity treated, disposed, or recycled on site in 1995		Quantity treated, disposed, or recycled on site in 1995		
		LM1	<u> </u>		
Sec.!!! A. Was any of the lastruction page	this waste shipped off-site in 1995				
Site 1	B. EPA IO No. of facility waste was shipped to Page 23.	C. System type shipped to D. Off-sit Page 23. availabilit			
	W,I,D,9,8,0,8,9,6,6,4,1	MO 2 9 Page 23.			
Site 2	B. EPA ID No. of facility waste was shipped to	C. System type shipped to O. Olf-sit	1 1 1		
	Page 23. N A	Page 23. availabili Page 23.			
		L''-			
Sec. IV A. Did new activities in 1995 result in minimization of this waste? 20 1 Yes (CONTINUE TO BOX B) Instruction page 24.					
B. Activity Page 24.	C. Other effects Page 25. O. Quantity recycled in 1995 Page 25.	due to new activities E. Activity/prod index Page 25	uction F. 1995 source reduction quantity Page 26.		
LW_ 5_ALW	□ 1 Yes	, O.O. N.A			
[M] [M]	¥2 No				
Comments:					
8					

BEFORE COPYING FORM, ATTACH SITE IDENTIFICATION LABEL OR ENTER:

SITE NAME:

EPA RCRA ID No. IAD073489288

EPA ID NO:

AlliedSignal Laminate Systems

665 Lybrand Street

Postville, IA



U.S. ENVIRONMENTAL PROTECTION AGENCY

1995 Hazardous Waste Report

FORM

:					
INSTRUCTIONS: Read the detaile	ed instructions beginning on page 16 of the 1995 Hazard	jous Waste Report booklet before completing this form.			
	on Instruction page 18. Spent ferricor product testing. Sol	c chloride solution from acid etcher lution is corrosive.			
B. EPA hazardous waste code Pa	ge 19.	C. State hazardous waste code Page 19.			
0 ₁ D	<u>, 0, 2</u> <u>D 0 0</u> ,7				
	NA NA				
Sv Sv	Origin code 1 Page 19 F. Source code Page 20. stem [A] 2	G. Point of measurement Page 20.			
Sec. II A. Ouantity genera Instruction Page 2	nted in 1994 B. Quantity generated in 1995 1. Page 21.	C. UDM Oensity D. Oid this site do any of the following to this waste: treat on site, dispose on site, recycle on site, or discharge to a sewer/PDTW? Page 21. 1 Yes (CONTINUE TO SYSTEM 1)			
3 60	0.0 1 3 5 0.0	☐ 1 lbs/gal □ 2 sg 전 2 No (SKIP TO SEC. III)			
ON-SITE PROCESS SYSTEM 1		ON-SITE PROCESS SYSTEM 2			
On-site process system type Page 22.	Quantity treated, disposed, or recycled on site in 1995	On-site process system type Quantity treated, disposed, or recycled on site Page 22. in 1995			
ĽM <u>I I</u>	<u> </u>	[M			
Sec.III A. Was any of thi	s waste shipped off-site in 1995				
Pa	. EPA ID No. of lacility waste was shipped to age 23.	C. System type shipped to Page 23. C. System type shipped to O. Off-site Page 23. Page 23.			
ı	M, I, D, O, 9, 8, O, 1, 1, 9, 9, 3				
	. EPA 10 No. of facility waste was shipped to age 23.	C. System type shipped to 0. Off-site E. Total quantity shipped in 1995 Page 23. Page 23.			
L	N ₁ A ₁	[M] [M] [rays 23. [L]			
Sec. IV A. Oid new activities in 1995 result in minimization of this waste? 1 Yes (CONTINUE TO BOX B) Instruction page 24.					
	Other effects Page 25. D. Quantity recycled in 1999 Page 25.	95 due to new activities E. Activity/production F. 1995 source reduction quantity Page 26. index Page 25.			
	□ 1 Yes □ 2 No □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □				
Comments:					

Comments:

BEFORE COPYING FORM, ATTACH SITE IDENTIFICATION LAB	EL OR ENTER:	23. Day	CO STARES	U.S. ENVIRONMENTAL PROTECTION AGENCY
SITE NAME:			W S	
EPA RCRA ID No. IADO			C PROTECT	1995 Hazardous Waste Report
EPA IO NO: AlliedSignal Laminate Sys		E	ORM	2
665 Lybrand Stree	Į.		GM I	WASTE GENERATION
Postville, IA	*		3141	AND MANAGEMENT
				4
INSTRUCTIONS: Read the detailed instructions beginning or	page 16 of the 1995 Hazardou	s Waste Report booklet befo	ore completing this fo	rm.
Sec. I A. Waste description - Instruction page 18.	Tenibable lie		o contain	ag magg agotono
Sec. I A. Waste description - Instruction page 18. and toluene from t			e Contain	is bags, acetone,
B. EPA hazardous waste code Page 19.		C. State hazardous waste o	rode Page 19	
		C. State Hazaiguus Waste t	coue rage ro.	•
F 10 10 3 1 F 1 0 0				
<u>D_O_O_1</u>	5 <u>U O Q 2</u>			
O. SIC code Page 19. E. Origin code 🗓 Page 19	F. Source code Page 20.	G. Point of measurement		I. RCRA - radioactive mixed Page 20.
System	LAI Q 9	Page 20.	Page 20. LB2_Q3	12.1
[3,0,8,3] Type LM				
Sec. 11 A. Quantity generated in 1994 B. Quantity g	enerated in 1995	C. UOM De		site do any of the following to this waste: treat on
Instruction Page 21. Page 21.		Page 21.		se on site, recycle on site, or discharge to a W? Page 21.
1 2 2 2 2	2 1 0 0 0	ا سنا ا		(CONTINUE TO SYSTEM 1)
	, ,2,1, φ,ρ,ο,	🗆 1 lbs/gal 🗆		(SKIP TO SEC. III)
ON-SITE PROCESS SYSTEM 1		ON-SITE PROCESS SYSTEM		
On-site process system type Quantity treated, dispo Page 22. in 1995	sed, or recycled on site	On-site process system typ Page 22.	ie Quantity t in 1995	reated, disposed, or recycled on site
	·	LM 1 1 1		
Sec.IIf A. Was any of this waste shipped off-site in Instruction page 22.	1995 DI Yes (CONTINUE DI 2 No (SKIP TO SE			
Site 1 B. EPA IO No. of lacility wa	5.00	C. System type shipped to		E. Total quantity shipped in 1995
Page 23.	0 4 5 2 0 3	Page 23.	availability code Page 23. 1	Page 23.
	945293	[M]0 6, 1		
Site 2 B. EPA IO No. of facility wa Page 23.	ste was shipped to	C. System type shipped to Page 23.		E. Total quantity shipped in 1995 Page 23
N A		MI I	Page 23.	
Sec. IV A. Oid new activities in 1995 result in minim	ization of this waste? 1 Yes	(CONTINUE TO BOX B)		
				000
B. Activity Page 24. C. Other effects Page 25.	D. Quantity recycled in 1995 Page 25.		ctivity/production F. 1 x Page 25.	995 source reduction quantity Page 26.
LW □ 1 Yes				
LW1 LW1 2 No		·	<u> </u>	

Section 1, Box B (cont.) U154, U159, U220, U188

U.S. ENVIRONMENTAL BEFORE COPYING FORM, ATTACH SITE IDENTIFICATION LABEL OR ENTER: PROTECTION AGENCY SITE NAME: EPA RCRA ID No. IAD073489288 1995 Hazardous Waste Report AlliedSignal Laminate Systems EPA IO NO: **FORM** 665 Lybrand Street **WASTE GENERATION** Postville, IA AND MANAGEMENT INSTRUCTIONS: Read the detailed instructions beginning on page 16 of the 1995 Hazardous Waste Report booklet before completing this form. A. Waste description Instruction page 18. Ignitable solvent mixture from process cleanup Sec. I Contains acetone/toluene and distillation process. B. EPA hazardous waste code Page 19. C. State hazardous waste code Page 19. F,0,0,3 F,0,0,5 1D 1 O 1 D 1O 1 3 5 1 U 1 O 0 2 D. SIC code Page 19. E. Origin code L Page 19 F. Source code Page 20. I. RCRA - radioactive mixed Page 20. G. Point of measurement H. Form code Page 20. Page 20. , 3, 0, 8, 3 <u>2</u> LAL 31 5 Type LM____L $\perp 1$ LB121013 A. Quantity generated in 1994 B. Quantity generated in 1995 C. UOM Density O. Did this site do any of the following to this waste: treat on Sec. II Instruction Page 21. Page 21. Page 21. site, dispose on site, recycle on site, or discharge to a sewer/POTW? Page 21. <u>1</u> ____. □ 1 Yes (CONTINUE TO SYSTEM 1) 2 1 0 1 0 0 0 0 1 2 Q 6 8 O Q.O 5 2 No (SKIP TO SEC. III) □ 1 lbs/gal □ 2 sq ON-SITE PROCESS SYSTEM 1 ON-SITE PROCESS SYSTEM 2 On-site process system type Quantity treated, disposed, or recycled on site On-site process system type Quantity treated, disposed, or recycled on site in 1995 Page 22. in 1995 Page 22. LM_{\perp} Sec.III A. Was any of this waste shipped off-site in 1995 □ 1 Yes (CONTINUE TO BOX B) Instruction page 22. □ 2 No (SKIP TO SEC IV) B. EPA ID No. of facility waste was shipped to C. System type shipped to D. Off-site E. Total quantity shipped in 1995 Site 1 Page 23. availability code Page 23. Page 23. 11_ OHDO93945293 [M] 0; 6 1 B. EPA ID No. of facility waste was shipped to Site 2 C. System type shipped to D. Off-site E. Total quantity shipped in 1995 Page 23. availability code Page 23. Page 23. Page 23. A. Did new activities in 1995 result in minimization of this waste?

1 Yes (CONTINUE TO BOX B) Sec. IV ¥ 2 No (THIS FORM IS COMPLETE) Instruction page 24. B. Activity Page 24. C. Other ellects Page 25. D. Quantity recycled in 1995 due to new activities E. Activity/production F. 1995 source reduction quantity Page 26. Page 25. index Page 25. □ 1 Yes **─** □ 2 No Comments: Section 1, Box B (cont): U154,U159,U220,U188

BEFORE COPYING FORM, ATTACH SITE IDENTIFICATION LABEL OR ENTER:

SITE NAME:

EPA RCRA ID No. IAD073489288

EPA ID NO: AlliedSignal Laminate Systems
665 Lybrand Street
Postville, IA

INSTRUCTIONS: Read the detailed instructions beginning on page 16 of the 1995 Hazardous Waste Repaired of the 1995 Hazardous Waste Repaired on the 1995 Hazardous



U.S. ENVIRONMENTAL PROTECTION AGENCY

1995 Hazardous Waste Report

FORM GM

INSTRUCTIONS: Read the detailed instructions beginning on page 16 of the 1995 Hazardou	s Waste Report booklet before completing this form.			
Sec. I A. Waste description Instruction page 18. Ignitable solv ground water. Contains toluen	ent mixture from contaminated e and methanol.			
B. EPA hazardous waste code Page 19.	C. State hazardous waste code Page 19.			
D O O 1 D O 1 8				
D ₁ O ₁ 3 ₁ 5 F ₁ O ₁ O ₁ 2 ₁ (F ₁ O ₁ O ₂ 3				
D. SIC code Page 19. E. Origin code 2 Page 19 F. Source code Page 20. System Type LM 1	G. Point of measurement H. Form code Page 20. Page 20. L31 LB 12 10 1 31 L21			
Sec. If A. Quantity generated in 1994 Instruction Page 21.	C. UOM Density D. Did this site do any of the following to this waste: treat on site, dispose on site, recycle on site, or discharge to a sewer/POTW? Page 21.			
1,9,48,50	1 1 1 1 1 1 1 1 1 1			
ON-SITE PROCESS SYSTEM 1	DN-SITE PROCESS SYSTEM 2			
On-site process system type Quantity treated, disposed, or recycled on site in 1995	On-site process system type Quantity treated, disposed, or recycled on site Page 22. in 1995			
	(M <u> </u>			
Sec.III A. Was any of this waste shipped off-site in 1995	· · · · · · · · · · · · · · · · · · ·			
Site 1 B. EPA ID No. of facility waste was shipped to Page 23. O H D O 9 3 9 4 5 2 9 3	C. System type shipped to Page 23.			
Site 2 B. EPA ID No. of facility waste was shipped to Page 23.	C. System type shipped to D. Off-site E. Total quantity shipped in 1995 Page 23. Page 23.			
Sec. IV A. Did new activities in 1995 result in minimization of this waste? Instruction page 24. A. Did new activities in 1995 result in minimization of this waste? Instruction page 24.				
B. Activity Page 24. C. Other effects Page 25. D. Quantity recycled in 1995 Page 25.	due to new activities E. Activity/production F. 1995 source reduction quantity Page 26. index Page 25.			
L ^W 1 1 1 1 Yes . L ^W 1 1 1 □ 2 No L 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1				

BEFORE COPYING FORM. ATTACH SITE IDENTIFICATION LABEL OR ENTER:

SITE NAME:

El'A RCRA ID No. IAD073489288 AliiedSignal Laminate Systems

EPA IO NO:

665 Lybrand Street Postville, IA



U.S. ENVIRONMENTAL PROTECTION AGENCY

1995 Hazardous Waste Report

FORM PS

WASTE TREATMENT, DISPOSAL, OR RECYCLING PROCESS SYSTEMS

INSTRUCTIONS: Read the detailed instructions beginning on page 33 of the 1995 Hazardous Waste Report booklet before completing this form.					
Sec. 1 A. Waste treatment, disposal, or recycling system description Instruction Page 38. Solvent Recovery through distillation process.					
B. System type Page 38. LM_O_2_1 C. Regulatory status Page 39. O_1_8		O. Operational status Page 39.	E. Unit types Page 39. O 1 N A		
Sec. II A. 1995 influent quantity Instruction page 40.		B. Maximum operational capa Page 41.	acity		
Total 1 1 2 2 7 1 0 5 8 RCRA 1 1 2 2 7 1 0		Total L L L L	<u>, ,1,6,5,0,</u> Ω, <u>0</u> ,		
C. 1995 liquid effluent quantity Instruction page 42.	v	D. 1995 solid/sludge residual Page 43.			
Total	M Density □ └── └──	Total	UDM Density UDM Consity 1 O O O O O 1 1 1 1 2 5g		
E. Limitation on maximum operational capacity Page 43. 1. 0 9 2. 3. 4.	ommercial capacity availabilit 43.	y code G. Percent Page 43.	capacity commercially available		
Comments:			:20		

BEFORE COPYING FORM, ATTACH SITE IDENTIFICATION LABEL OR ENTER:

SITE NAME:

EPA ID NO:

EPA RCRA ID No. IAD073489288

AlliedSignal Laminate Systems 665 Lybrand Street Postville, IA



U.S. ENVIRONMENTAL **PROTECTION AGENCY**

1995 Hazardous Waste Report

OFF-SITE IDENTIFICATION

MCTOUCTIONS.	Read the detailed instructions on the reverse side before completing	this form
NSTRUCTIONS:	Head the detailed instructions on the reverse side before completing	uns tom.
A. EP	PA ID No. of off-site installation or transporter [I A O O O O 1 O 9 8 2 7	B. Name of off-site installation or transporter A-Tec Recycling, Inc.
C. Handler type	(CHECK ALL THAT APPLY) Generator Transporter TSDR	0. Address of off-site installation Street 5745 NE $17th$ Street City Des Moines State $1 A_1$ 10 5 0 3 1 3 1 1 1 1 1 1 1 1 1 1
Site 2 A. EF	PA ID No. of off-site installation or transporter $[W \ \dot{Y} \ \dot{I} \ \dot{D}] \ [9 \ 8] \ O_1 \ [8 \ 9] \ G_1 \ G_1 \ G_1 \ I_2$	B. Name of off-site installation or transporter Safety-Kleen Corp.
C. Handler type	(CHECK ALL THAT APPLY) □ Generator Transporter TSOR	D. Address of off-site installation
Site 3 A. El	PA IO No. of off-site installation or transporter [I L D O 9 9 2 O 2 6 8 1	B. Name of off-site installation or transporter Chemical Waste Management
C. Handler type	(CHECK ALL THAT APPLY) □ Generator CTransporter CTSOR	O. Address of off-site installation Street 4301 Infirmary Rd. City West Carrolton State O. H. Zip 45 449
Site 4 A. E	PA IO No. of off-site installation or transporter [M I D O 9 8 O 1 1 9 9 2	B. Name of off-site installation or transporter Cynokem
C. Handler type	(CHECK ALL THAT APPLY) Generator Transporter TSDR	O. Address of off-site installation Street 12381 Schaefer Hwy City Detroit State (MI Zp 4 8 2 2 7 -
Site 5 A. E	PA ID No. of off-site installation or transporter [I L D 9 8 1 9 5 7 2 3 6	B. Name of off-site installation or transporter SET Environmental
C. Handler type	(CHECK ALL THAT APPLY)	0. Address of off-site installation Street 450 Sumar Road

BEFORE COPYING FORM, ATTACH SITE IDENTIFICATION LABEL OR ENTER:

SITE NAME:

EPA ID NO:

EPA RCRA ID No. IAD073489288

AlliedSignal Laminate Systems 665 Lybrand Street

Postville, IA



U.S. ENVIRONMENTAL PROTECTION AGENCY

1995 Hazardous Waste Report

OFF-SITE IDENTIFICATION

INSTRUCTIONS: Read the detailed instructions on the reverse side before completing	this form.
A. EPA ID No. of off-site installation or transporter A, R, D, 9, 8, 1, 9, 0, 8, 5, 5, 7	B. Name of off-site installation or transporter J.B. Hunt
C. Handler type (CHECK ALL THAT APPLY) Generator Transporter TSOR	D. Address of off-site installation Street NA City State Zip
City 2 A EDA ID No. of all site installation as a	
A. EPA ID No. of off-site installation or transporter O, H, D, O, 9, 3, 9, 4, 5, 2, 9, 3 C. Handler type (CHECK ALL THAT APPLY) Generator Transporter TSDR	B. Name of off-site installation or transporter Chemical Waste Management D. Address of off-site installation Street 4301 Infirmary Rd. City West Carrolton State QH J Zip 4151449-
A. EPA ID No. of off-site installation or transporter O HIO O O O O O O O O O O O O O O O O O	B. Name of off-site installation or transporter Midwest Environmental Transport D. Address of off-site installation Street NA City State Zip
Site 4 A. EPA ID No. of off-site installation or transporter	B. Name of off-site installation or transporter
C. Handler type (CHECK ALL THAT APPLY) Generator Transporter TSDR	D. Address of off-site installation Street City State Zip !
Site 5 A. EPA ID No. of off-site installation or transporter	B. Name of off-site installation or transporter
C. Handier type (CHECK ALL THAT APPLY) Generator Transporter TSDR	D. Address of off-site installation Street City State Zip
Comments:	